

**1. Reservation Details**

Name of Adult making reservation: _____

Owensboro YMCA Member Y / N

Organization name: _____

Address: _____ City: _____ State: _____ Zip: _____

*Phone: _____ *Email: _____ *Adult DOB: _____

2. Select the desired rental space

	Space	Hours	Member	Capacity	Room Description
<input type="checkbox"/>	Downstairs Studio*	0-2	\$105+ tax	20	Aerobics studio with mirror. Round tables and padded chairs available. Ideal for small showers/parties.
<input type="checkbox"/>	Downstairs Studio*	2-4	\$185+ tax	20	Aerobics studio with mirror. Round tables and padded chairs available. Ideal for small showers/parties.
<input type="checkbox"/>	Tumble Room*	0-2	\$50+ tax	20	Padded Room perfect for cheer practice or little ones with energy.
<input type="checkbox"/>	Tumble Room*	2-4	\$85+ tax	20	Padded Room perfect for cheer practice or little ones with energy.
<input type="checkbox"/>					
<input type="checkbox"/>					
<input type="checkbox"/>					
<input type="checkbox"/>					
<input type="checkbox"/>					

~YMCA Staff will confirm availability outside of YMCA class/program schedule. Rentals are only permitted to YMCA members. The total number of participants includes adults and kids.~

3. Rental Details

Rental Date: _____ Rental time: _____ Estimated Total attendees: _____

Rental Type: Shower Group Celebration Practice Other: _____

TOTAL RENTAL COST: _____ DEPOSIT (50% of total rental cost): _____

4. Contract Agreement

I understand the following terms:

- Reservation is not confirmed until 50% deposit received.
- Cancellation may be made with 2 weeks' notice to receive a refund of the deposit.
- Rentals cancelled without 2 weeks' notice will not receive a refund of the deposit.
- The balance is due 7 days prior to the rental.
- There will be a \$50 fee for each 30 min increment invoiced to rentals that exceed their time slot.
- Excessive cleaning after the rental will incur a \$50 charge per hour of cleaning time.
- Set up is permitted 15 minutes before the start of the rental.
- A Certificate of Insurance and roster may be requested for groups.

Reservation Signature: _____ Date: _____

YMCA Staff Signature: _____ Date: _____

STAFF USE ONLYBooked in Daxko (date): _____ Date Entered on Corporate Calendar: _____
Date Confirmation emailed: _____ Confirmation mailed: _____ Reminder emailed: _____

Deposit amount: _____ Deposit pd date: _____ Balance due: _____ Balance pd date: _____